BUREAU OF SUBSTANCE ABUSE SERVICES



Substance Abuse News

Winter 2000

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Expanded SA Treatment Funds Available for Women and their Families

In response to the high priority to develop substance abuse treatment for women and their families that is culturally and gender specific, the Bureau of Substance Abuse Services over the past two years has been working on initiatives to address the challenges of changing treatment concepts from a predominantly male model to one that is based on individual needs of women and their families.

Due to an increase in Wisconsin's FFY 1999 Substance Abuse Prevention and Treatment (SAPT)

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 $Philip\ McCullough, Sinikka\ McCabe\ \&\ William\ White\ at\ the\ BSAS\ Statewide\ Meeting$

block grant award, effective on October 1, 1999, funds are available for designing treatment services that are gender and culturally specific for women and their families. The SAPT block grant increase of \$1,167,900 per year has been allocated for programs in the 1999-2001 budget and after that as funds are available. An RFP (Request for Proposal) solicitation is in process for the budgeted funds, which have been increased by other federal funds from the TANF (Temporary Assistance for Needy Families) program administered by the Department of Workforce Development.

The deadline for those applying for these funds is December 23, 1999, and the awards will be announced on January 11, 2000. (See **RFPs** on page 6.)

BSAS Statewide Meeting Receives Good Marks for Keynoter William White

The Bureau's 5th Annual Statewide meeting at the Paper Valley hotel in Appleton was host to over 150 human service professionals and treatment providers. This year's keynote speaker was William L. White, a Senior Research Consultant at Chestnut Health Systems/Light-house Institute.

White's presentation, "Listening to History: Lessons for a Field in Crisis," covered three episodes in the history of addiction treatment and recovery in America, the parallels we observe and the 2 mistakes we need to learn from. White outlined seven areas of challenge for the future. They are:

- 1. **Shifting Drug Trends**: Reemergence of poly drug phenomena, methamphetamine, 40% heroin purity, sniffing and smoking (no needle delivery), etc.
- 2. Political Turmoil: The SA field is not well positioned; therapeutic pessimism and the thinking that elimination of access to substances eliminates the need for treatment, etc. We need to develop a parallel process to the current climate of de-medicalization, recriminalization and restigmatization. We must: Reengage and regenerate the grass roots movement and have people to stand up and show stable recovery.
- 3. Changes in Organization and Funding: The criminal justice system is a growth industry, and treatment dollars are moving into criminal justice or child protective agencies. There is a fundamental change from personal recovery to social control. Managed Care has all but eliminated inpatient treatment; clients are shut off due to lack of funds. The transition to MC offers multiple etiological pathways.
- 4. **Managed Care**: MC is an easy whipping boy; we need to look to the field to center itself, articulate organization codes of professional practice. How do we govern/discipline ourselves.
- 5. Bridge the Gap Between
 Clinical Research and
 Clinical Practice: There is
 exciting research going on but
 (See Statewide on page 6.)

BSAS to Study Costs/Benefits of

Improved Insurance Coverage for AODA Treatment

The Bureau of Substance Abuse Services has initiated a project to examine the costs and benefits to employers that offers better health plan benefits for substance abuse problems. The project will include a task force of representatives from selected employers in Wisconsin, insurance companies and HMOs, treatment providers, the Office of the Insurance Commissioner and other key individuals. Over the next 12 months, this task force will review its own actuarial data as well as other studies from across the country. It will then formulate recommendations concerning what it believes to be optimal coverage for AODA treatment and what strategies make the most sense in terms of public policy.

This undertaking—named the Enhanced Substance Abuse Benefits Project—represents a departure from previous efforts to amend the state mandates for insurance benefits for AODA treatment. "I really felt it was time for a fresh approach, one that's collaborative with industry rather than regulatory," said Philip McCullough, BSAS Director. According to McCullough, the project represents a partnership that brings employers, managed care companies, and treatment providers together to work cooperatively rather than as adversaries. To coordinate the project, the Bureau has retained Brian Shoup, formerly the executive director of Ministry Behavioral Health (Stevens Point) and now a private consultant.

For over 20 years, Wisconsin Statute (632.89) has required group health plans to provide a minimum level of AODA and mental health coverage. Although these mandated benefits are only minimum requirements, few health plans exceed them. Treatment providers generally view them as too rigid and inadequate. Payers have maintained that high coverage will mean significantly higher premiums to be passed on to employers. "Employers have been caught in the middle of this argument," said Shoup. "Our aim is to jointly examine the facts, including cost/benefit data that the task force will have from its own actuarial study." McCullough and Shoup indicated they were pleased with the interest being expressed by companies that have been approached to date.

The project received the endorsement of the State Council on Alcohol and Other Drug Abuse (SCAODA) at its September 10 meeting. It also recently received the endorsement of the Wisconsin Alcohol and Drug Treatment Providers Association (WADTPA), which also continues to support parity legislation. Commenting on the positive response that the project has received, Sinikka McCabe, Administrator of the Division of Supportive Living, said, "This initiative is critically important not just to the Department of Health and Family Services, but to employers and employees alike throughout Wisconsin. We intend to have something of value when the task force completes its work in a year." For more information, contact the **Bureau of Substance Abuse** Services at (608) 266-2717 or Brian Shoup at (715) 824-5034.

Additional Dollars for Compulsive Gambling Awareness Campaign

The state biennial budget, signed

into law in late October, contains an increase in funding for the statewide compulsive gambling awareness campaign. This increase of \$150,000 per year has been added to the current contract that the Bureau of Substance Abuse Services (BSAS) has with the Wisconsin Council on Problem Gambling (WCPG). The WCPG is a non-profit organization located in Green Bay, web site: http://www.wi-problemgamblers.org. Their primary mission is to educate and promote public understanding of problem gambling and the disorder of compulsive gambling. The increase in funding brings the total state allocation for the campaign to \$250,000 per year.

Among the initiatives for the campaign are (1) the expanded visibility of the Council's 24-hour helpline, which provides referral services for callers, (2) a public relations/media campaign, (3) internet web site development and maintenance, (4) piloting and implementation of a high school gambling prevention curriculum, (5) institutional awareness through training for human service professionals, (6) development and implementation of a statewide information and networking conference, (7) mini-grants for community-based awareness activities, (8) a needs assessment survey to determine what areas of research are most needed in Wisconsin regarding the disorder of compulsive gambling, and (9) the

development of a children's booklet geared toward children of compulsive gamblers to help them understand the disorder.

For further information contact Gary Nelson at (608) 266-2720 or the Wisconsin Council on Problem Gambling at (920) 437-8888.

Tobacco Sales Enforcement Program

DHFS has entered into a contract with the U.S. Food and Drug Administration (FDA) for the implementation of a regulatory program to enforce the FDA regulation restricting the sale of tobacco products to minors. The Bureau of Substance Abuse Services (BSAS) will have responsibility for implementation of the program. The goal of the program is to identify retailers who sell tobacco products to minors and assist the FDA in enforcing the federal regulation. Retailers found in violation will be subject to civil money penalties from the FDA. BSAS will be sub-contracting with county health departments to conduct the investigations, which are expected to begin by February 2000. This program will enhance Wisconsin's effort to comply with the federal Synar Regulation. The Synar Regulation requires states to implement strategies designed to reduce the availability of tobacco products to youth. For information on tobacco-control initiatives administered by BSAS, contact Gary Nelson at (608) 266-2720.



Wisconsin Bureau for the Deaf and Hard of Hearing

The Wisconsin Office for the Deaf and Hard of Hearing (WDHH) is now the Wisconsin Bureau for the Deaf & Hard of Hearing. Linda Huffer is the Interim Director, (608) 266-5451, voice and TTY. Their Bureau is located at 1 West Wilson Street, B275, Madison, WI 53703, and telephone: (608) 266-3118, voice and TTY.

New RFP Opportunity: SA Program for Deaf, Deaf-Blind and Hard Of Hearing Individuals

An RFP (Request for Proposal) will be issued in January for the statewide deaf and hard of hearing AODA program. The RFP will provide \$125,000 annually for barrier-free substance abuse treatment for persons who are deaf, deaf-blind and hard of hearing. Ongoing federal funds are provided for an AODA Deaf and Hard of Hearing program through the Substance Abuse Prevention and Treatment (SAPT) block grant. Funds awarded may not be used to provide hospital-based inpatient

services and must meet the requirements described in HFS 61.

The program will have an advisory committee (consisting of professionals and consumers) to provide ongoing consultation. Cultural competence and knowledge of best practices for deaf, hard of hearing, deaf-blind populations are required as well as compliance with all state and federal regulations. Questions regarding the RFP should be directed to Jamie McCarville at (608) 267-7712 or e-mail: mccarjm@dhfs.state.wi.us.

DHFS Y2K Readiness Summary

The Department of Health and Family Services has made a commitment to be able to seamlessly deliver services to the citizens of Wisconsin through and beyond January 1, 2000. DHFS is engaged in a comprehensive program to provide the maximum possible confidence that all items are "Year 2000 compliant." Following is a summary of "readiness" as of the end of November 1999.

Hardware and Operating

Software: DHFS is approximately 100% complete in network upgrades. Of the approximately 3,800 PC's managed by the DHFS, only 5 percent were not compliant and are now replaced.

Software Applications: All modifications and testing to mainframe applications has been completed. inventory and testing of PC based applications are now being done. Communication with vendor supported software is

continuing and progress is monitored. All data exchange agreements are being reviewed.

Other Equipment: All institution, facility, and office equipment has been inventoried and assessed. Remediation and testing is 95 percent complete. In addition, the Department is reviewing contractual arrangements with partners and suppliers.

In addition, DHFS is making a concerted effort to advise all vendors and organizations that do business with the Department of the potential Y2K problems.

(This is an excerpt from the DHFS Y2K web site. Additional information may be accessed at http://www.dhfs.state.wi.us/y2k/index.htm)

Recovery/Support Meetings

Milwaukee

1. Open 12-Step Recovery Meeting for People with Disabilities.

When: Monday evenings from 6:30 to 7:30

2. AODA Support Group (includes Sign Language Interpreter).

When: Friday afternoons from 3:00 to 4:00.

These two meetings are held at 1711 S. 11th Street, 2nd Floor (Corner of 11th and Mitchell), Milwaukee (wheelchair accessible) and are sponsored by Vision Unida Inc. Contact Jessica C. at (414) 671-4716

3. AA Meeting for Deaf and Hard of Hearing

When: Tuesday evenings at 7:00 Where: H.O.W. to Club, 8930 W. National Avenue, Milwaukee. Contact: John Reske (1-800) 947-6644 and (414) 546-3246 TTY.

Madison

- 4. An Alternative to Traditional 12-Step Recovery Meetings follows:
- SMART Recovery* meetings are held Wednesdays at 7:00 p.m.
- Moderation Management**
 meetings are held Mondays at
 7:00 p.m.

Both meetings are held at the Wil-Mar Center, 953 Jenifer St., Madison.

*SMART (Self Management And Recovery Training) is a nationwide, nonprofit organization that offers about 275 weekly, free support groups to individuals who desire to gain independence from any type of addictive behavior. SMART Recovery meetings are also offered in a variety of correctional facilities.

**Moderation Management (MM) is a recovery program and national self-help network for people who have made the healthy decision to reduce their drinking. The main purpose of MM is to help people reduce their drinking to a level that no longer causes life problems. This level could be a reduced level of alcohol consumption or total abstinence. MM totally supports the individual's right to choose his or her own recovery path, whether moderation or abstinence.

For information about these programs and groups, contact Henry Steinberger, PhD at (608) 256-5176.

Wisconsin Clearinghouse Center for RADAR Network

RADAR Network stands for Regional Alcohol and Drug Awareness Resource Network. The Wisconsin Clearinghouse for Prevention Resources is the official RADAR Network Center for the state of Wisconsin. Network centers receive information about new materials produced by Federal agencies through SAMHSA, the Substance Abuse and Mental Health Services Administration (including CSAT). This includes treatment information that is not normally the focus of the Clearinghouse.

Network Centers are able to access large quantities of information that are generally unavailable to the public. For example, RADAR recently listed a small booklet entitled, "Principles of Drug Addiction Treatment: A Research-Based Guide" published by NIDA (National Institute on Drug Abuse), a 54-page booklet that can be ordered in quantity.

Contact the Wisconsin Clearinghouse for Prevention Resources at 800-248-9244 (mailing address: 1552 University Avenue, Madison, WI 53705-4085) or watch their Web site for future updates.

http://www.uhs.wisc.edu/wch/

Publications

"Combined Analysis of the State Treatment Needs Assessment **Program Studies,"** Executive Summary, October 1999, is the summary of a report written by Welch, Fisher, Quirke and Moberg, titled, "The Wisconsin Needs Assessment Project: An Integrative Analysis and Summary." Both the summary and complete report are available from the UW Center for Health Policy and Program Evaluation, 502 N. Walnut Street, Madison, WI 53705, or by calling the Bureau of Substance Abuse Services at (608) 266-2717.

The SA Field Loses a Friend

We regret to note the passing of Mike Campbell on December 20. Mike will be remembered by BSAS for his warm sense of humor and dedication to his work, at both Eau Claire County and most recently as Director at Arbor Place in Menomonie. Mike will be truly missed.

Conferences

January 23-27, 2000. 26th Winter Midwest Institute Lansing, Michigan, at the Holiday Inn South, sponsored by the Michigan Department of Community Health and the Wisconsin Department of Health and Family Services, and in cooperation with training providers in Illinois, Indiana, and Ohio. Scholarships for Wisconsin and Michigan residents may still be available to help defray the cost of the Institute. The Midwest Institute has applied for certification and

academic credit. Contact Deborah Powers, BSAS, 1 W. Wilson St., Room 434; PO Box 7851, Madison, WI, 53707. You may call (608) 266-9218 or e-mail at Powerdj@dhfs.state.wi.us

March 16-17, 2000. The 2nd Annual Statewide Conference of the Wisconsin Council on Problem Gambling (WCPG). WCPG's 2000 Conference on Compulsive Gambling will be held at The Best Western Midway Hotel, Green Bay, WI. Exhibit tables are available, but space is limited. For more information on sponsorship, exhibits and the conference, contact Karin at the WCPG office: (920) 437-8888.

May 8-10, 2000. The 34th Annual WAAODA Spring Conference, Defining and Building Excellence in the 21st Century, Chula Vista Resort, Wisconsin Dells. This conference is a joint effort of the Wisconsin Association on Alcohol and Other Drug Abuse, Inc., Bureau of Substance Abuse Services, National Alliance for the Mentally Ill of Wisconsin, Wisconsin Council on Community Corrections and the Wisconsin Association of Alcohol and Drug Abuse Counselors, Inc. Included among the 30 planned workshops are the following: Dr. John Hesley, author of "Rent Two Films & Call Me in the Morning," using videos in psychotherapy; HFS75, Substance Abuse Standards; AODA certification; practical skills training; an advanced counselor track; counseling basics and more. A conference brochure is due in January. For more information or to request a brochure, call the WAAODA Office at 1-800-787-9979.

RFPs (From page 1.)

Because contracts to those competing in the RFP process could not be awarded by October 1999 when the funds became available, the Department of Health and Family Services needed to encumber the first year SAPT funds by September 30, 1999. Therefore, one-time funds in the amount of \$1,167,900 were allocated for women's projects that include the following.

- Updating of the 1995 Women and Substance Abuse tapes and manual.
- Fetal Alcohol Syndrome/Effects outreach, which includes education, information and support to families affected by FAS/FAE and Training to Primary Care Physicians.
- Development of a culturallyspecific curriculum for Native Americans relating to AODA and women's health.
- Training or consulting on clinical issues involving the treatment of co-occurring mental health and substance abuse disorders in an integrated treatment model.
- A project in Milwaukee County to improve collaboration between the child welfare safety system, W-2 agencies and the substance abuse and mental health treatment community.

The RFP solicitation includes two proposals. The first is a statewide solicitation for Urban/Rural Women's Alcohol and Other Drug Abuse Treatment Programs and Community-Based Alcohol and Other Drug Abuse Treatment Programs for TANF Eligible Families. The TANF funds added \$1,000,000 to the \$1,167,900 of SAPT funds for a total of

\$2,167,900 for each year of the biennium. These funds are to be used to meet the special needs of women and TANF eligible families with problems resulting from alcohol or other drug abuse and to emphasize parent education, vocational and housing assistance and coordination with other community programs and with treatment under intensive care.

The second proposal is the TANF Eligible Individuals' AODA Treatment Programs in Milwaukee County and is to provide new or expanded community-based AODA treatment programs that meet the special needs of TANF eligible individuals with problems resulting from AODA. The funds total \$7,500,000 over an 18-month period.

The RFP information, including the complete RFPs, TANF Guidelines and Frequently Asked Questions (FAQs) are available on the Bureau's web site at http://www.dhfs.state.wi.us/substabuse/index.htm or from the Department's home page (http://www.dhfs.state.wi.us under "partners and vendors."

The next issue of *BSAS News* will provide information regarding the successful projects and follow their progress throughout the next year.

Statewide (From Page 2.)

there is also research that is poorly perceived. An example is the use of acupuncture: research is negative but results are good, and the same is true for naltrexone.

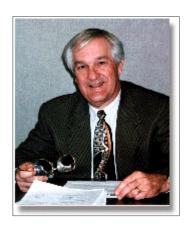
6. **Movement into Community**: Need strong consumer movement. Need to see the face of recovery.

7. Human Services
Infrastructure: Need new leaders: current age range is 49 to 60; in five years, no one will be left. Need leadership institutes with an 8-10 year window.

Mr. White shared ideas for approaching the new millennium: *Centering rituals* to allow for refocus; *Mirroring rituals* to fight depression and find passion and fire; *Acts of self care* (this is not the 100 yard dash), and the *cultivation of unpaid acts of service* in our personal lives.

White has a masters in Addiction Studies and more than 30 years of experience in the addictions field as a clinician, clinical director, administrator and trainer and consultant. He recently received the 1999 McGovern Family Foundation Award for the best book on addiction recovery (Slaying the Dragon – The History of Addiction Treatment and Recovery in America) and was featured in the Bill Moyers' PBS special, "Close To Home: Addiction in America."

The Statewide meeting is the Bureau's yearly get-together with the SA field for exchange of information, providing a forum for discussion and sharing state and federal policies. Individual treatment program successes are highlighted and providers are invited to present exhibits of agency information.



From the Director

This is usually my spot for listing new programs and updated rules and policies. Instead, I'd like to look from a broader perspective at what we have accomplished in the past year that will change the course of how we better serve the alcoholic or drug abuser and his or her family in the new millennium. What small steps were taken that begin the next hundred miles?

In my mind, our most important accomplishment of 1999 was the foundation we laid for collaboration across cross-systems boundaries.

To begin, we met with the Bureau of Community Mental Health and the Division of Health Care Financing and designed demonstration projects for AODA/ MH Managed Care as recommended by the Governor's Blue Ribbon Commission. We continued our collaboration with the Division of Public Health in training seminars for primary physicians on Fetal Alcohol Syndrome/Effects (FAS/FAE). Expanding this base of services to pregnant women and their children, we entered into a contract with the University of Wisconsin to provide outreach to families having children with FAS/FAE, providing education, information and referral through the statewide resource centers

developed by our women's statewide project (WEN). BSAS entered into a dialogue with representatives of the insurance industry and busi-ness to find better health plan benefits for substance abuse problems. We continued our cross-systems training between AODA/

MH providers for better understanding and services to persons with these co-occurring issues.

Crossing DHFS boundaries, we worked with the Department of Workforce Development in the development and implementation of better screening for substance abuse and W2 recipients, thereby providing a knowledge base and place at the table for further collaborative efforts. The possibilities for expanding our work with W2 and Child Welfare Safety Services materialized rapidly in the final quarter of 1999 with the advent of the one-time substance abuse block grant funds. The contracts entered into in Milwaukee County will go far toward identifying systems and procedures for ensuring compre-hensive services to women and their families who have substance abuse and mental health issues along with their need for services through the social services system.

We have an exciting agenda for the year 2000: The planned promlegation of the new SA Standards; the new gender and culturally specific women's programs that will be developed from the RFPs written about in this issue; plans to begin teleconferencing SA training; the new federal FDA contract for Youth Tobacco Cessation programs; and the next round of needs assessment activities to include contracts with three Native American tribes.

Finally, I want to wish you all a healthy and prosperous New Year and new millennium.

Substance Abuse News

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The Bureau of Substance Abuse Services in the Department of Health and Family Services' Division of Supportive Living endeavors to increase the quantity and improve the quality of prevention, intervention and treatment programs serving persons with substance abuse problems and their families; improve coordination among state agencies and within DHFS having responsibilities for substance abuse services; and improve substance abuse work force training and development.

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Substance Abuse Services

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